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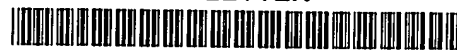
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| APPLICATION NUMBER | FILING/RECEIPT DATE | FIRST NAMED APPLICANT | ATTORNEY DOCKET NUMBER |
|--------------------|---------------------|-----------------------|------------------------|
| 09/782,687         | 02/12/2001          | Jafar Savoj           | 19717-001110US         |

20350  
TOWNSEND AND TOWNSEND AND CREW  
TWO EMBARCADERO CENTER  
EIGHTH FLOOR  
SAN FRANCISCO, CA 94111-3834

CONFIRMATION NO. 4983

## FORMALITIES LETTER



\*OC000000006027126\*

Date Mailed: 05/01/2001

## NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

05/31/2001 HABB11 00000076 201430 09782687

FILED UNDER 37 CFR 1.53(b)

01 FC:105 130.00 CH

Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is unsigned.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 130.

The application is informal since it does not comply with the regulations for the reason(s) indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

- Substitute drawings in compliance with 37 CFR 1.84 because:
  - drawing sheets do not have the appropriate margin(s) (see 37 CFR 1.84(g)). Each sheet must include a top margin of at least 2.5 cm. (1 inch), a left side margin of at least 2.5 cm. (1 inch), a right side margin of at least 1.5 cm. ( 5/8 inch), and a bottom margin of at least 1.0 cm. (3/8 inch);

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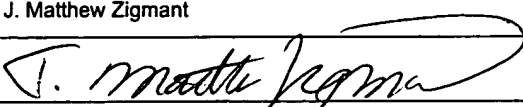
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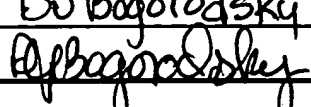
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|  |                               |                   |
|--|-------------------------------|-------------------|
|  <p><b>TRANSMITTAL FORM</b><br/>to be used for correspondence after initial filing)</p> | <b>Application Number</b>     | 09/782,687        |
|  | <b>Filing Date</b>            | February 12, 2001 |
|  | <b>First Named Inventor</b>   | Savoj, Jafar      |
|  | <b>Group Art Unit</b>         | 2633              |
|  | <b>Examiner Name</b>          | Unassigned        |
| <b>Total Number of Pages in This Submission</b>  | <b>Attorney Docket Number</b> | 19717001110       |

| ENCLOSURES (check all that apply)  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment / Response<br><input type="checkbox"/> After Final<br><input checked="" type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/ Incomplete Application<br><input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application)<br><input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br><b>Executed Statement under 37 CFR 3.73(b), copy of executed Assignment, copy of Notice to File Missing Parts of Nonprovisional Application, Return postcard</b> |
| <b>Remarks</b><br>The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.   |   |   |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |   |  |
|--|---|--|
| <b>Firm and Individual name</b>            | Townsend and Townsend and Crew LLP<br>J. Matthew Zigmant                            |  |
| <b>Signature</b>                           |  |  |
| <b>Date</b>                                | May 24, 2001  |  |

| CERTIFICATE OF MAILING  |   |                         |
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| <b>Typed or printed name</b>  | DJ Bogorodsky   |                         |
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|--|--|--|--|
| <div style="display: flex; align-items: center; justify-content: center;"> <div style="border: 1px solid black; border-radius: 50%; padding: 10px; text-align: center; margin-right: 10px;"> <b>FEE TRANSMITTAL</b><br/>for FY 2001<br/>MAY 29 2001<br/>PATENT &amp; TRADEMARK OFFICE         </div> <div> <b>FEE TRANSMITTAL</b><br/>for FY 2001<br/><small>Patent fees are subject to annual revision.</small> </div> </div> |  | <b>Complete if Known</b>                 |  |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$) 130  |  | <b>Application Number</b> 09/782,687     | <b>Filing Date</b> February 12, 2001   |
|  |  | <b>First Named Inventor</b> Savoj, Jafar | <b>Examiner Name</b> Unassigned        |
|  |  | <b>Group Art Unit</b> 2633               | <b>Attorney Docket No.</b> 19717001110 |

| <b>METHOD OF PAYMENT</b>  |                 |                |                 |  | <b>FEE CALCULATION (continued)</b>  |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
|---|-----------------|----------------|-----------------|--|---|-----------------|----------------|-----------------|-----------------|----------------|-----------------|----------------|-----------------|-----------------|--------------------|-----|-----|-----|-----|-------------------------------------|-------------------|-----|-----|-----|-----|---|------------------|-----|-----|-----|-----|---------------------------|--------------------|-----|-------|-----|-------|--|------------------------|-----|--|-----|------|--|--|--------------|--------------|----------------|----------|---|---|-----|-----|------|----|--|---|--------------------|-----|-----|-----|---|-----------------|----------------|-----------------|-----------------|----------|--|----|-----|-------|------------------------|-----|---|----|-----|-------|-----------------------------------|-----|--|-----|-----|-----|---------------------------------------|-----|------------------|----|-----|-----|--|-----|--|----|-----|-----|--|-----|--------------------------|--|-----|-------|-----|-------|---|--|-----|-----|-----|----|----------------------------------|--|-----|-------|-----|-----|------------------------------------|--|-----|-------|-----|-----|--------------------------------|--|-----|-----|-----|-----|------------------|--|-----|-----|-----|-----|-----------------|--|-----|-----|-----|-----|-------------------------------|--|-----|----|-----|----|---|--|-----|-----|-----|-----|---|--|-----|----|-----|----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|---|--|---------------------|--|--|--|--|--|
| 1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:<br><br>Deposit Account Number: <b>20-1430</b><br><br>Deposit Account Name: <b>Townsend and Townsend and Crew LLP</b><br><br><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17<br><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  |                 |                |                 |  | <b>3. ADDITIONAL FEES</b>   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 2. <input type="checkbox"/> Payment Enclosed:<br><br><input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other  |                 |                |                 |  | <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td>130</td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet.</td><td></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>116</td><td>390</td><td>216</td><td>195</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>117</td><td>890</td><td>217</td><td>445</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>118</td><td>1,390</td><td>218</td><td>695</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>128</td><td>1,890</td><td>228</td><td>945</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119</td><td>310</td><td>219</td><td>155</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120</td><td>310</td><td>220</td><td>155</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121</td><td>270</td><td>221</td><td>135</td><td>Request for oral hearing</td><td></td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>141</td><td>1,240</td><td>241</td><td>620</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>142</td><td>1,240</td><td>242</td><td>620</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>143</td><td>440</td><td>243</td><td>220</td><td>Design issue fee</td><td></td></tr> <tr><td>144</td><td>600</td><td>244</td><td>300</td><td>Plant issue fee</td><td></td></tr> <tr><td>122</td><td>130</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>123</td><td>50</td><td>123</td><td>50</td><td>Petitions related to provisional applications</td><td></td></tr> <tr><td>126</td><td>180</td><td>126</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>581</td><td>40</td><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>146</td><td>710</td><td>246</td><td>355</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td><td></td></tr> <tr><td>149</td><td>710</td><td>249</td><td>355</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td><td></td></tr> <tr><td>179</td><td>710</td><td>279</td><td>355</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>169</td><td>900</td><td>169</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> <tr><td colspan="6">Other fee (specify)</td></tr> </tbody> </table> |                 |                |                 |                 | Large Fee Code | Entity Fee (\$) | Small Fee Code | Entity Fee (\$) | Fee Description | Fee Paid           | 105 | 130 | 205 | 65  | Surcharge - late filing fee or oath | 130               | 127 | 50  | 227 | 25  | Surcharge - late provisional filing fee or cover sheet. |                  | 139 | 130 | 139 | 130 | Non-English specification |                    | 147 | 2,520 | 147 | 2,520 | For filing a request for reexamination |                        | 112 | 920*   | 112 | 920* | Requesting publication of SIR prior to Examiner action |  | 113          | 1,840*       | 113            | 1,840*   | Requesting publication of SIR after Examiner action |   | 115 | 110 | 215  | 55 | Extension for reply within first month |   | 116                | 390 | 216 | 195 | Extension for reply within second month |                 | 117            | 890             | 217             | 445      | Extension for reply within third month |    | 118 | 1,390 | 218                    | 695 | Extension for reply within fourth month |    | 128 | 1,890 | 228                               | 945 | Extension for reply within fifth month |     | 119 | 310 | 219                                   | 155 | Notice of Appeal |    | 120 | 310 | 220  | 155 | Filing a brief in support of an appeal |    | 121 | 270 | 221  | 135 | Request for oral hearing |  | 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding |  | 140 | 110 | 240 | 55 | Petition to revive - unavoidable |  | 141 | 1,240 | 241 | 620 | Petition to revive - unintentional |  | 142 | 1,240 | 242 | 620 | Utility issue fee (or reissue) |  | 143 | 440 | 243 | 220 | Design issue fee |  | 144 | 600 | 244 | 300 | Plant issue fee |  | 122 | 130 | 122 | 130 | Petitions to the Commissioner |  | 123 | 50 | 123 | 50 | Petitions related to provisional applications |  | 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt |  | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) |  | 146 | 710 | 246 | 355 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  | 149 | 710 | 249 | 355 | For each additional invention to be examined (37 CFR § 1.129(b)) |  | 179 | 710 | 279 | 355 | Request for Continued Examination (RCE) |  | 169 | 900 | 169 | 900 | Request for expedited examination of a design application |  | Other fee (specify) |  |  |  |  |  |
| Large Fee Code  | Entity Fee (\$) | Small Fee Code | Entity Fee (\$) | Fee Description  | Fee Paid  |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 105   | 130             | 205            | 65              | Surcharge - late filing fee or oath  | 130   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 127   | 50              | 227            | 25              | Surcharge - late provisional filing fee or cover sheet.                    |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 139   | 130             | 139            | 130             | Non-English specification  |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 147   | 2,520           | 147            | 2,520           | For filing a request for reexamination                                     |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 112   | 920*            | 112            | 920*            | Requesting publication of SIR prior to Examiner action                     |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 113   | 1,840*          | 113            | 1,840*          | Requesting publication of SIR after Examiner action                        |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 115   | 110             | 215            | 55              | Extension for reply within first month                                     |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 116   | 390             | 216            | 195             | Extension for reply within second month                                    |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 117   | 890             | 217            | 445             | Extension for reply within third month                                     |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 118   | 1,390           | 218            | 695             | Extension for reply within fourth month                                    |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 128   | 1,890           | 228            | 945             | Extension for reply within fifth month                                     |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 119   | 310             | 219            | 155             | Notice of Appeal   |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 120   | 310             | 220            | 155             | Filing a brief in support of an appeal                                     |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 121   | 270             | 221            | 135             | Request for oral hearing   |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 138   | 1,510           | 138            | 1,510           | Petition to institute a public use proceeding                              |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 140   | 110             | 240            | 55              | Petition to revive - unavoidable   |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 141   | 1,240           | 241            | 620             | Petition to revive - unintentional   |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 142   | 1,240           | 242            | 620             | Utility issue fee (or reissue)   |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 143   | 440             | 243            | 220             | Design issue fee   |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 144   | 600             | 244            | 300             | Plant issue fee  |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 122   | 130             | 122            | 130             | Petitions to the Commissioner  |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 123   | 50              | 123            | 50              | Petitions related to provisional applications                              |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 126   | 180             | 126            | 180             | Submission of Information Disclosure Stmt                                  |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 581   | 40              | 581            | 40              | Recording each patent assignment per property (times number of properties) |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 146   | 710             | 246            | 355             | Filing a submission after final rejection (37 CFR § 1.129(a))              |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 149   | 710             | 249            | 355             | For each additional invention to be examined (37 CFR § 1.129(b))           |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 179   | 710             | 279            | 355             | Request for Continued Examination (RCE)                                    |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 169   | 900             | 169            | 900             | Request for expedited examination of a design application                  |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| Other fee (specify)   |                 |                |                 |  |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| <b>1. BASIC FILING FEE</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>101</td><td>710</td><td>201</td><td>355</td><td>Utility filing fee</td><td></td></tr> <tr><td>106</td><td>320</td><td>206</td><td>160</td><td>Design filing fee</td><td></td></tr> <tr><td>107</td><td>490</td><td>207</td><td>245</td><td>Plant filing fee</td><td></td></tr> <tr><td>108</td><td>710</td><td>208</td><td>355</td><td>Reissue filing fee</td><td></td></tr> <tr><td>114</td><td>150</td><td>214</td><td>75</td><td>Provisional filing fee</td><td></td></tr> </tbody> </table> <p style="text-align: right;"><b>SUBTOTAL (1)</b> (\$) <span style="border: 1px solid black; padding: 2px 20px;"></span></p> |                 |                |                 |  | Large Fee Code  | Entity Fee (\$) | Small Fee Code | Entity Fee (\$) | Fee Description | Fee Paid       | 101             | 710            | 201             | 355             | Utility filing fee |     | 106 | 320 | 206 | 160                                 | Design filing fee |     | 107 | 490 | 207 | 245   | Plant filing fee |     | 108 | 710 | 208 | 355                       | Reissue filing fee |     | 114   | 150 | 214   | 75                                     | Provisional filing fee |     | <b>2. EXTRA CLAIM FEES</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>-20**</td> <td>=</td> <td>X</td> <td>=</td> </tr> <tr> <td>-3**</td> <td>=</td> <td>X</td> <td>=</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td>X</td> <td>=</td> </tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>102</td><td>80</td><td>202</td><td>40</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>104</td><td>270</td><td>204</td><td>135</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>109</td><td>80</td><td>209</td><td>40</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>110</td><td>18</td><td>210</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> </tbody> </table> <p style="text-align: right;"><b>SUBTOTAL (2)</b> (\$) <span style="border: 1px solid black; padding: 2px 20px;"></span></p> |     |      |  |  | Total Claims | Extra Claims | Fee from below | Fee Paid | -20**   | = | X   | =   | -3** | =  | X                                      | = | Multiple Dependent |     | X   | =   | Large Fee Code                          | Entity Fee (\$) | Small Fee Code | Entity Fee (\$) | Fee Description | Fee Paid | 103                                    | 18 | 203 | 9     | Claims in excess of 20 |     | 102                                     | 80 | 202 | 40    | Independent claims in excess of 3 |     | 104                                    | 270 | 204 | 135 | Multiple dependent claim, if not paid |     | 109              | 80 | 209 | 40  | ** Reissue independent claims over original patent |     | 110                                    | 18 | 210 | 9   | ** Reissue claims in excess of 20 and over original patent |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| Large Fee Code  | Entity Fee (\$) | Small Fee Code | Entity Fee (\$) | Fee Description  | Fee Paid  |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 101   | 710             | 201            | 355             | Utility filing fee   |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 106   | 320             | 206            | 160             | Design filing fee  |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 107   | 490             | 207            | 245             | Plant filing fee   |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 108   | 710             | 208            | 355             | Reissue filing fee   |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 114   | 150             | 214            | 75              | Provisional filing fee   |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| Total Claims  | Extra Claims    | Fee from below | Fee Paid        |  |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| -20**   | =               | X              | =               |  |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| -3**  | =               | X              | =               |  |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| Multiple Dependent  |                 | X              | =               |  |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| Large Fee Code  | Entity Fee (\$) | Small Fee Code | Entity Fee (\$) | Fee Description  | Fee Paid  |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 103   | 18              | 203            | 9               | Claims in excess of 20   |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 102   | 80              | 202            | 40              | Independent claims in excess of 3  |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 104   | 270             | 204            | 135             | Multiple dependent claim, if not paid                                      |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 109   | 80              | 209            | 40              | ** Reissue independent claims over original patent                         |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 110   | 18              | 210            | 9               | ** Reissue claims in excess of 20 and over original patent                 |   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| <p>**or number previously paid, if greater; For Reissues, see above</p>   |                 |                |                 |  | <p>The Commissioner is authorized to charge any additional fees to the above noted Deposit Account.</p> <p>*Reduced by Basic Filing Fee Paid    <b>SUBTOTAL (3)</b> (\$) <span style="border: 1px solid black; padding: 2px 20px;">130</span></p>   |                 |                |                 |                 |                |                 |                |                 |                 |                    |     |     |     |     |                                     |                   |     |     |     |     |   |                  |     |     |     |     |                           |                    |     |       |     |       |  |                        |     |  |     |      |  |  |              |              |                |          |   |   |     |     |      |    |  |   |                    |     |     |     |   |                 |                |                 |                 |          |  |    |     |       |                        |     |   |    |     |       |                                   |     |  |     |     |     |                                       |     |                  |    |     |     |  |     |  |    |     |     |  |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |

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|---------------------|--------------------|-----------------------------------|---------------------------------|-----------|--------------|
| <b>SUBMITTED BY</b> |                    |                                   | <b>Complete (if applicable)</b> |           |              |
| Name (Print/Type)   | J. Matthew Zigmant | Registration No. (Attorney/Agent) | 44,005                          | Telephone | 650-326-2400 |
| Signature           |                    |                                   |                                 | Date      | May 24, 01   |

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